PART B - FEE(S) TRANSMITTAL

his form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents

	or <u>Fax</u>				P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000		
	INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks i through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be maited to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for						
٠	maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 03/23/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
	Dr Jaime Zacharias Av. Luis Pasteur 5917 Vitacura Santiago,				Certificate of Mailing or Transmission I hereby curify that this Foo(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUB FBE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
06/22/200	5 LWONDIM2 00000008	10710000		•			(Depositor's name)
		1071000		•			(Signature)
01 FC:250 02 FC:150			(Dato)				
	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/710,888 08/10/2004 JAIME ZACHARI				AS	a vev ve 1 000 a vev	4887
	TITLE OF INVENTION: R	epetitive progressiv	E AXIAL DISPLA	CEMENT PATTERI	N FOR PHACOEMUI	LSIFIER NEEDLE TIP	
	APPI,N, TYPE	SMALL ENTITY	issue fe	33 PC	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUB
	nonprovisional	YE\$.\$700		\$300	\$1000 06/23/2005	
	EXAMINER		ART UN	IT CI	ASS-SUBCLASS	<u> </u>	
	VIRDI, SUNDEEP		3763		604-220000	-	
	I. Change of correspondence CFR 1.363). Claringe of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 (Number is required.	Correspondence ition form e of a Customer	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered automey or agent) and the names of up to 2 registered patent automeys or agents. If no name is listed, no name will be printed.				
	ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed a recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
	(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						•
Please check the appropriate assignce category or categories (will not be printed on the patent):							pup catity Government
	Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Advance Order - # of Copies						
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status, See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status, See 37 CFR							
:	The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.						
	Authorized Signature	Jaim &	<u>arhang</u>	، للإ ما	Date	TUNE 21,	2005
	Typed or printed name	JAINE	ZACH A	RIAS	Registration		
	This collection of informatio in application. Confidentialis submitting the completed ap- this form and/or suggestions. Box 1450, Alexandria, Virgin Alexandria, Virginia 22313-1 Under the Parceyork Parkey	n is required by 37 CFR 13: ty is governed by 35 U.S.C. pileation form to the USPTY for reducing this burden, sh nia 22313-1450. DO NOT 5 1450.	11. The information 122 and 37 CFR 1 2. Time will vary of ould be sent to the SEND FEES OR C	n is required to obtain .14. This collection is depending upon the in- Chief information O OMPLETED FORM	or retain a benefit by s estimated to take 12 ndividual case. Any c flicer, U.S. Patent are S TO THIS ADDRES	the public which is to file (and minutes to complete, includin omments on the amount of the Trademark Office, U.S. Dept S. SEND TO: Commissioner	by the USPTO to process) g gathering, preparing, and me you require to complete strument of Commerce, P.O. for Patents, P.O. Box 1450,
-	Olizai die i spetwork Reduct	ion ver or 1335' no betsons	are redmited to test	cond to a collection of	information unless it	displays a valid OMB control	number.

PTOL-85 (Rev. 12/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE